



State of New Mexico
Commissioner of Public Lands

310 OLD SANTA FE TRAIL
P.O. BOX 1148
SANTA FE, NEW MEXICO 87504-1148

Oil Gas and Minerals Division

**COMMISSIONER'S
OFFICE**

Phone (505) 827-5760
Fax (505) 827-5766
www.nmstatelands.org

Salt Water Disposal Easement Disposal Rental Reporting Form

I, _____, (Company Name) am the holder of State Land Office Salt Water Disposal Easement No. **SW**_____.

Well Name: _____

Well API #: _____

This report covers the following period, from _____ to _____.¹ During this time period the injected volumes reported to the OCD on the C-115 are as follows;

1. OCD Injection Volumes Match NMSLO Reported volumes (Y/N) _____

2. All volumes from **Tier 1 wells**²:

Total #of barrels injected _____ @ \$0.05 = \$ _____

3. All volumes from **Tier 2 wells**³:

Total #of barrels injected _____ @ \$0.11 = \$ _____

TOTAL Payment submitted for this period \$ _____

Check number _____

Contact name and Phone number _____

Current E Mail _____

Make checks payable to;
Commissioner of Public Lands
P.O. Box 1148, Santa Fe, NM 87504

¹ A separate form should be used for each month, unless reporting for the entire calendar year.

² **Tier 1** wells are: Operation of produced water disposal wells **is not** Grantee's Primary Business. "Primary Business," defined herein as transportation, movement and, or disposal of produced water generates 50% or greater of Grantee's annual gross revenues.

³ **Tier 2** wells are: Operation of produced water disposal wells **is** Grantee's Primary Business.